				**************************************	ffice:		
OSO SHEET	P			cation Number rmation Number	10/6 2236	88,422	
T	'RANSMITI	'AL	Filin	g Date	Octo	October 16, 2003	
	FORM	-	First Named Inventor		VOEL	KER, Dean E.	
		-	Group	Art Unit	3679		
		<u> </u>	Exami	ner Name	D. B	ochna	
	ages in thi ssion		Attor	ney Docket No.	VD1-	3057-U	
19 4 T		ENCLOSU	RES	(check all that	appl	y)	
X X	Fee Transmitt			Assignment Papers (for an application)		After Allowand Communication Group	
	Response /Ame	endment		Drawing(s) FORMAL		Appeal Communi to Board of Ap	
	After Final Affidavits/De	claration		Licensing - related papers		and Interferen	
	Extension of Requests	Time		Petition Petition to Convert		Appeal Communi to Group	
				to Provisional Application		Proprietary Information	
	Express Aband	lonment	B	Power of Attorney, Revocation, Change		Status Letter	
	Information I		_	of Correspondence Address		Additional Enclosures identify below	
	with disclose			Terminal Disclaimer			
	Certified Cop			Small Entity Stmt.	*Asso	*Amendment Transmitta *Associate Power of Attorney	
	Response to M Parts/Incompl Application			Request for Refund			
	Response to M Parts under 3 1.52 or 1.53			Return Receipt Card Remarks			
Firm o	r Individual	R. REAMS	GOODLO	B. JR. REG. N	0. 32,46	6	
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Signature

PTO/SB/17 (10/03)

Approved for use through 07/31/2005. OMB 0651-0032

Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE
e Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

FEE TRANSMITTAL for FY 2005

Patent fees are subject to annual revision After DECEMBER 8, 2004.

TOTAL AMOUNT OF PAYMENT

\$ 500.00

(\$)

	<u> </u>
Co	mplete if Known
Application Number	10/688,422 Confirmation No. : 2236
Filing Date	October 16, 2003
First Named Inventor	DEAN E. VOELKER
Examiner Name	D. BOCHNA
Group / Art Unit	3679
Attorney Docket No.	VD1-3057-U

METHOD OF PAYMENT (check one)	FEE CALCULATION (continued)				
	3. ADDITIONAL FEES				
1. X The Commissioner is hereby authorized to charge indicated foca and credit any over payments to:	Large Entity Small Entity				
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Deposit Account 07-1613		7			
Number		4			
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Name		7			
X Charge Any Additional Applicant claims small	1081 250 2081 125 Utility Appl. Size Fee (1st 50 sheets over 100	┨			
Fee Required Under <u>entity status</u> 37 C.F.R. §§ 1.16 and 1.17 37 CFR 1.27	1812 2,520 1812 2,520 For filing a request for ex parte reexam.	4			
<u>5, 5, 1, 1, 2, 1</u>	1804 920* 1804 920* Requesting publication of SIR prior to Examiner action				
2. Payment Enclosed: X Check Order Other	1805 1,840* 1805 1,840*Requesting publication of SIR after Examiner action]			
Older	1251 120 2251 60 Extension for reply within first month	┚			
FEE CALCULATION	1252 450 2252 225 Extension for reply within second month				
1. FILING /SEARCH/ EXAMINATION FEES	1253 1,020 2253 510 Extension for reply within third month]			
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Fee Fee Fee Fee Description Fee Paid Code (\$) Code (\$)	1255 2,160 2255 1080 Extension for reply within fifth month	┛			
1011 300 2011 150 Utility filing fee	1401 500 2401 250 Notice of Appeal	_			
1111 500 2111 250 Search fee	1402 500 2402 250 Filing a brief in support of an appeal				
1311 200 2311 100 Examination fee	1403 1,000 2403 500 Request for oral hearing				
1012 200 2012 100 Design filing fee	Petition to institute a public use proceeding	7			
1005 200 2005 100 Provisional filing fee	Petition to revive - unavoidable	1			
SUBTOTAL (1) (\$)	Petition to revive - unintentional	1			
	1453 1500 2453 750	1			
2. EXTRA CLAIM FEES Fee from	1501 1,400 2501 700 Paging issue for	-			
Extra Claims below Fee Paid	1502 800 2502 400 Design issue fee	_			
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Independent 9 - 4 = 5 x 100 = 500	1460 130 1460 130 Petitions to the Commissioner	L			
Multiple Dependent = n/a	1807 50 1807 50 Processing fee under 37 CFR 1.17(q)	1			
**or number previously paid, if greater; For Reissues, see below	1806 180 1806 180 Submission of Information Disclosure Stmt	1			
Large Entity Small Entity Fee Fee Fee Fee Fee Description	8021 40 8021 40 Recording each patent assignment per	-			
Fee Fee Fee Fee Description Code (\$) Code (\$)	property (times number of properties)				
1202 50 2202 25 Claims in excess of 20	1809 790 2809 395 Filing a submission after final rejection (37 CFR 1.129(a))	1			
1201 200 2201 100 Independent claims in excess of 3	1810 790 2810 395 For each additional invention to be	┨			
1203 360 2203 180 Multiple dependent claim, if not paid	examined (37 CFR 1.129(b))	╛			
1204 200 2204 100 ** Reissue independent claims over original patent	1801 790 2801 395 Request for Continued Examination (RCE)				
1205 50 2205 25 ** Reissue claims in excess of 20 and over original patent	Other fee (specify)]			
SUBTOTAL (2) (\$) 500	Reduced by Basic Filing Fee Paid SUBTOTAL (3) (\$)				
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SUBMITTED BY					Complete (if applicable)		
Typed or Printed Name	R REAMS GOODLOF/JR.	(Reg. Number	32,466	
Signature	Keans Hoodlogn	D	Date	07/25/05	Deposit Account User ID	4035	

Burden Hour Statement: This form is estimated to take 0/2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. 1450, Alexandria, VA 22313-1450 EXPRESS MAIL LABEL NO.: ED619037383US



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I hereby certify that this paper (along with any paper referred to as being attached or enclosed) is being deposited with the United States Postal Service on the date shown below in an envelope as "Express Mail Post Office to Addressee" mailing Label Number ED619037383US addressed to:

MS AMENDMENT Commissioner for Patents

P.O. Box 1450

Alexandria (VA 22313-145

Signature of Depositor

Rhonda Goodloe

Print Name of Depositor Date: JULY 25, 2005

IN THE UNITED STATES

PATENT AND TRADEMARK OFFICE

Confirmation No.:	2236)
Applicant:	VOELKER, Dean E.	,)
Serial No.:	10/688,422	,)Art Unit:)3679
Filed:	October 16, 2003))Examiner:
Title:	SLIP COUPLING FOR PIPE, AND METHOD OF USING A SLIP COUPLING IN PIPELINES FOR COLLECTION OF LANDFILL GAS)BOCHNA, D.)))

MS AMENDMENT

Commissioner for Patents P.O. Box 1451 Alexandria, VA 22313-1450

AMENDMENT TRANSMITTAL

1. Transmitted herewith is an amendment for this application.

STATUS

2. Applicant hereby asserts status as a small entity under 37 C.F.R. § 1.27.

Other than a small entity.

EXTENSION OF TERM

3. The proceedings herein are for a patent application and the provisions of 37 CFR § 1.136 apply.

(complete (a) or (b), as applicable)

(a) Applicant petitions for an extension of time under 37 CFR § 1.136 (fees: 37 CFR § 1.17(a)(1)-(4) for the total number of months checked below.

er (

EXTENSION (months)	FEE FOR OTHER THAN SMALL ENTITY	FEE FOR SMALL ENTITY
one month	\$ 120.00	\$ 60.00
	\$ 120.00	00.00
two months	\$ 450.00	\$ 225.00
three months	\$ 1,020.00	\$ 510.00
four months	\$ 1,590.00	\$ 795.00

FEE: \$

If an additional extension of time is required, please consider this a petition therefore.

(check and complete the next time, if applicable)

An extension for ______months has already been secured. The fee paid therefore of \$______is deducted from the total fee due for the total months of extension now requested.

Extension fee due with this request: \$_____

OR

(b) Applicant believes that no extension of term is required. However, this conditional petition is being made to provide for the possibility that applicant has inadvertently overlooked the need for a petition \ for extension of time.

FEE FOR CLAIMS

4. The fee for claims (37 CFR § 1.16(b)-(d) has been calculated as shown below:

(Col. 1)		(Col. 2)	(Col. 3)	SMALL ENTI	TY		
	CLAIMS REM AFTER AMEN		HIGHEST NO. PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE		ADDITIONAL FEE
TOTAL	80	MINUS	85	= 0	x \$25	-	\$ 0
INDEP.	9	MINUS	4	= 5	x \$100		\$500
FIRS	T PRESENTAT	ION OF MULTIPLE	DEP. CLAIM	-	+ \$180	=	\$n/a
				TOTAL ADDIT	TIONAL PEE		\$500.00

		complete	e (c) or (d), a	s applicable)
(c)		No additiona		ms is required.
(d)	\boxtimes	Total additi	OR onal fee for c	laims required \$500.00.
			FEE PAYMEN	T
5.	\boxtimes	Attached is	a check in the	sum of \$500.00.
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			AND/OR	
\boxtimes		ny additional <mark>07-1613.</mark>	fee for claims	s is required, charge Account
Date:	: July	25, 2005		SIGNATURE OF ATTORNEY
Phone Fax:		253-859-9128 253-859-891		R. REAMS GOODLOE, JR. Reg. No. 32,466
CUSTO	OMER N	NO.: 20793		Suite 102 24722 - 104th Avenue, S.E. Kent, Washington 98030-5322

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CUSTOMER NO.: 20793



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Rhonda Goodloe

Print Name of Depositor Date: JULY 25, 2005

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PATENT AND TRADEMARK OFFICE

Confirmation No.:	2236)
Applicant:	VOELKER, Dean E.	
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MS: AMENDMENT

Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

AMENDMENT AND RESPONSE UNDER 37 C.F.R. SECTION 1.111

Sir:

This is response to the First Office action on the merits in this application, mailed April 25, 2005. Pursuant to 37 C.F.R. §1.111, the applicant respectfully requests reconsideration and further examination of his application, in view response, comments, and clarifications contained amendments, The amendments are as follows: herein.

Amendments to the specification begin at page 2; and